

**BAKER BOTTS LLP**Please type a plus sign (+) inside this box → ☐

AF. # 2837

TECHNICAL CENTER 2000  
JUN 13 2001  
RECEIVED**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/393,473
	Filing Date	Sept. 10, 1999
	First Named Inventor	Wayne Cohen
	Group Art Unit	2837
	Examiner Name	S. Hsieh
Total Number of Pages in This Submission	Attorney Docket Number	A32636-072708.0116

**ENCLOSURES (check all that apply)**

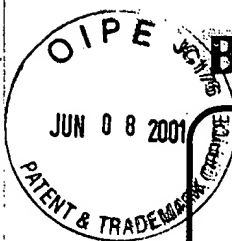
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input type="checkbox"/>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Baker Botts LLP 30 Rockefeller Plaza New York, NY 10112	
Signature		Att Name: Richard G. Berkley PTO Reg: 25,465
Date	June 6, 2001	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: June 6, 2001			
Typed or printed name	Richard G. Berkley		
Signature		Date	June 6, 2001

**BAKER BOTTS LLP**

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**210****Complete if Known**

Application Number	A32636-072708.0116
Filing Date	Sept. 10, 1999
First Named Inventor	Wayne Cohen
Examiner Name	S. Hsieh
Group Art Unit	2837
Attorney Docket No.	A32636-072708.0116

**METHOD OF PAYMENT**

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**Deposit Account Name **Baker Botts LLP**☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
710	355	Utility filing fee	
320	160	Design filing fee	
490	245	Plant filing fee	
710	355	Reissue filing fee	
150	75	Provisional filing fee	

SUBTOTAL (1) (\$)**0****2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	20 ** = 0	X	0
Independent Claims	3 ** = 0	X	0
Multiple Dependent			

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
80	40	Independent claims in excess of 3
270	135	Multiple dependent claim, if not paid
80	40	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**0**

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for ex parte reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	55
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	155
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,240	620	Petition to revive - unintentional	
1,240	620	Utility issue fee (or reissue)	
440	220	Design Issue fee	
600	300	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
710	355	For each additional invention to be examined (37 CFR § 1.129(b))	
710	355	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**210****SUBMITTED BY**Name (Print/Type) **Richard G. Berkley**Signature *Richard G. Berkley*

Registration No. (Attorney/Agent)

**25,465****Complete (if applicable)**Telephone **212-408-2554**Date **June 6, 2001**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.